

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 10/27/03  
Application Type:: Non-provisional  
Subject Matter:: Utility  
Title:: METHODS AND SYSTEMS FOR ENABLING  
AND STABILIZING TOOTH MOVEMENT  
  
Attorney Docket Number:: 021663-000110US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure:: 3  
Total Drawing Sheets:: 8  
Small Entity?: Yes  
Petition included?: No  
Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: PETER  
Middle Name:: M.  
Family Name:: BREINING  
City of Residence:: San Mateo  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 616 Prospect Row  
City of Mailing Address:: San Mateo  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94401

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: DENNIS  
Middle Name:: R.  
Family Name:: STEWART  
City of Residence:: Los Gatos  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 18247 Bayview Drive  
City of Mailing Address:: Los Gatos  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 95033

#### **Correspondence Information**

Correspondence Customer Number:: 20350

#### **Representative Information**

Representative Customer Number:: 20350

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/423026	11/01/02

#### **Assignee Information**

Assignee Name:: BAS Medical, Inc.  
Street of mailing address:: 1660 South Amphlett Blvd.  
Suite 200  
City of mailing address:: San Mateo  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94402